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DECLARATION FOR UTILITY OF		Attorney Docket Nu	mber OS	TEONICS 3.0-454		
	DESIGN APPLICATION CFR 1.63)	First Named Inventor		nis Pichon		
		COMPLE		IF KNOWN		
(37		Application Number	10/795,946			
Declaration Submitted with Initial OR	x Declaration	Filing Date	March 8, 2004			
	Submitted after Initial Filing (surcharge	Group Art Unit	N/A	N/A		
Filing	(37 CFR 1.16 (e)) required)	Examiner Name	Not Yet A	Not Yet Assigned		
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530							
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Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Denis Family Name or Surname Pichon						Pichon	
Inventor's Signature Date 30/03/2004,							
Residence: C	Mordelles ity	State	Country		ance	Citizenship	France
Mailing Address: 15, avenue Georges Pompidou							
City	Mordelles	State	ZIP	35	310	Country	France
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and mid	dle [if any])	Christophe			Family Name or Surname	**************************************	Cueille
Inventor's Signature		=	文		7	Date 3 th	March 2004
Residence: C	Missy ity	State	Country		ance	Citizenship	France
Mailing Address: Les Hauts Monceaux							
City	Missy	State	ZIP	142	210	Country	France
X Addit	ional inventors are being named	on the1	supplem	ental A	Additional Inventor((s) sheet(s) PTO/S	B/02A attached hereto.

LD-537\

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DECLARA	ATION		ADDITIONAL INVENT Supplemental Sheet	OR(S) Page 1 of 1			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and			Family Name or Surname				
Inventor's // /	38)		Delogé				
Signature				Date 30th Mard 04			
Residence: City	State	Count	France	France Citizenship			
Mailing Address: 17, rue Pablo Picasso							
Douvres City	State	Zip	14440	France			
Name of Additional Joint Invento	or, if any:	<u> </u>	A petition I	nas been filed for this unsigned inventor			
Given Name (first and	middle (if any))			Family Name or Surname			
Inventor's Signature				Date			
Residence: City	State	Count	try	Citizenship			
Mailing Address:							
City	State	Zip		Country			
Name of Additional Joint Invento	or, if any:	_	A petition h	nas been filed for this unsigned inventor			
Given Name (first and middle (if any))			Family Name or Surname				
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Inventor's Signature		т		Date			
Residence: City	State	Count	try	Citizenship			
Mailing Address:							
City	State	Zip		Country			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and	middle (if any))			Family Name or Surname			
Inventor's							
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